



## Families That Care— Guiding Good Choices

Families That Care—Guiding Good Choices (GGC) is a multimedia program that gives parents of children in grades four through eight (8 to 13 years old) the knowledge and skills needed to guide their children through early adolescence. Over the past 20 years, research has shown that positive parental involvement is an important protective factor that increases school success and buffers children against later problems such as substance abuse, violence, and risky sexual behaviors.

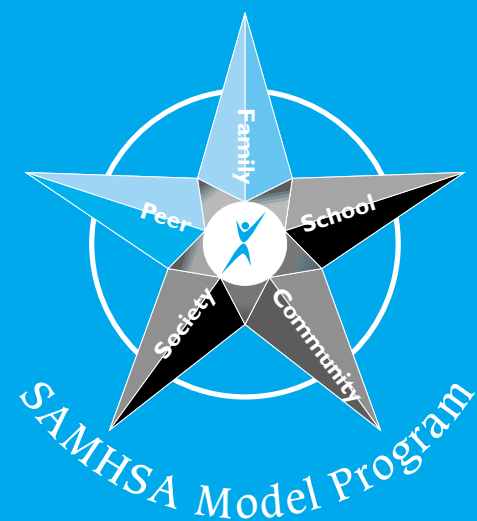
This program aims to—

- Strengthen and clarify family expectations for behavior
- Enhance the conditions that promote bonding in the family
- Teach skills to parents and children that allow children to successfully meet the expectations of their family to resist drug use

Formerly known as Preparing for the Drug Free Years, GGC offers more family activities and exercises.

### TARGET POPULATION

GGC, which targets families with children aged 8 to 13, works with parents and children from various ethnic and socioeconomic backgrounds. It has been tested with Hispanic/Latino, African American, Samoan, American Indian, and White families. It has been implemented in diverse urban and rural communities across the United States.



*Effective Substance Abuse and  
Mental Health Programs  
for Every Community*

### Proven Results

- Reduced substance use 2 years after the intervention was completed
- Among those not using substances at 1-year followup, more remained substance-free at 2-year followup (relative risk reduction of 26%)
- Among those using substances at 1-year followup, fewer had progressed to more serious substances at the 2-year followup
- Significantly lower rates of increase in initiation of drinking to drunkenness and marijuana use over a 4-year period
- Less drinking in the past month (relative reduction of 40.6%)
- Increased parent communication of substance abuse rules and consequences
- Greater involvement in family activities and decisions and better ability to manage anger and conflict

### INTERVENTION

Universal

Selective

Indicated

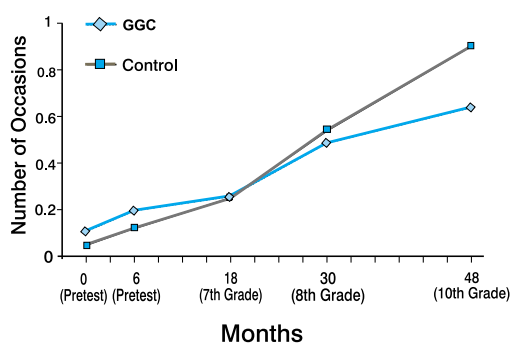


**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
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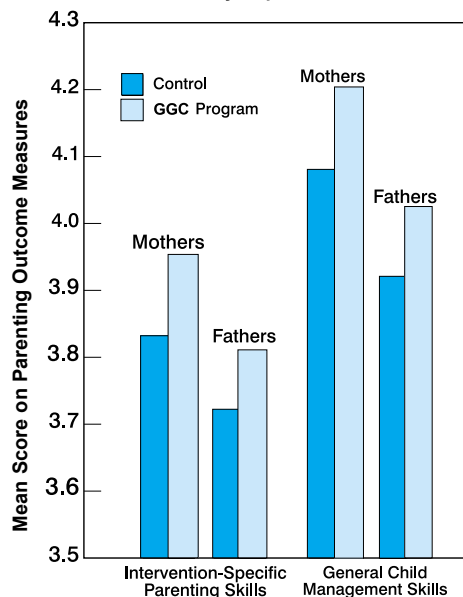
## OUTCOMES

- Significant effects on targeted parenting behaviors were found at posttest and maintained 1 year later.
- At the 2-year followup, youth in the GGC group who had not initiated substance use at the 1-year followup were significantly more likely to have remained nonusers than their counterparts in the control group. Youth in the GGC group who had initiated substance use at the 1-year followup were significantly less likely to have progressed to more frequent or varied substance use than youth in the control group.
- At the 3.5-year followup, the increase in rates of initiation for drunkenness and marijuana use was significantly lower in the GGC group than for youth in the control group. The GGC group also had a significantly lower proportion of youth who reported using alcohol during the previous month, lower frequencies of alcohol use, and lower growth of alcohol use frequency.

**Past Month Frequency of Drinking Occasions by Experimental Condition**



**GGC and Control Group Improvements in Parenting Outcome Means by Experimental Condition**



## BENEFITS

GGC increases parents' ability to—

- Provide teenagers with appropriate opportunities for involvement in the family
- Recognize competencies and skills
- Teach children how to keep their friends and popularity while using drug-refusal skills
- Set and communicate healthy beliefs and clear standards for children's behavior

## HOW IT WORKS

GGC comprises five 2-hour sessions usually held over 5 consecutive weeks. Curriculum can also be presented in ten 1-hour sessions. Session topics include:

- Preventing substance abuse in your family
- Setting clear family expectations regarding drugs and alcohol
- Avoiding trouble
- Managing family conflict
- Strengthening family bonds

The sessions are interactive and skill-based, with opportunities for parents to practice new skills and receive feedback from workshop leaders and other parents. Video-based vignettes demonstrate parenting skills through the portrayal of a variety of family situations. Families also receive a *Family Guide* containing family activities, discussion topics, skill-building exercises, and information on positive parenting. The program has been offered to parents in schools, worksites, faith communities, community centers, homes, hospitals, and prisons. Parents who attend all five sessions are awarded a certificate of completion at the program's end.

## IMPLEMENTATION ESSENTIALS

The workshop leaders who conduct GGC should be skilled in providing parenting workshops, understand the principles of adult learning, and be knowledgeable about risk and protective factors as they relate to prevention. It is highly recommended that workshop leaders attend a 3-day workshop leader's training event. Two co-leaders who share responsibilities for instruction, modeling skills, and answering questions, lead workshops. It is recommended that this two-person team consist of a parent and someone with group facilitation experience. It is most beneficial if workshop leaders are representative of the community.

The GGC workshop site should be in an accessible, safe, and familiar part of the neighborhood. Although it's not mandatory, providing participants with transportation, food, and childcare will support parent recruitment and retention. The site should have enough meeting space to comfortably accommodate parents and their children and should be equipped with video equipment, an easel or chalkboard, and an overhead projector (or computer-based LCD projector). All other materials for the workshop come with the purchase of the GGC Workshop Kit or are provided when attending an GGC workshop leader's training event.

## PROGRAM BACKGROUND

GGC, formerly named Preparing for the Drug Free Years, grew from research that showed that positive parental involvement is an important factor in helping children resist substance use and other antisocial behaviors. GGC's curriculum was developed to teach parents the skills they need to reduce the risk factors and enhance the protective factors that can help prevent substance abuse in their families.

The GGC curriculum was field-tested for 2 years in 10 Seattle public schools before being made into a video-assisted program for wider distribution in 1987. Since 1987, GGC has been implemented in more than 30 States and Canada. The program has trained more than 120,000 families.

## EVALUATION DESIGN

In addition to the initial field tests, the curriculum has been tested in a controlled trial in a rural setting, as part of a regional broadcast media program, in different statewide implementations, within a health maintenance organization, and in a project focusing on families of color.

The most comprehensive test of this program was a randomized clinical trial led by Dr. Richard Spoth at Iowa State University. Families of sixth graders enrolled in 33 rural schools in 19 contiguous counties in a midwestern State participated in this test. Schools were selected based on school free-lunch-program eligibility and community size (8,500 or fewer). Schools were assigned using a randomized block design, wherein blocks were formed on the basis of school size and the proportion of students residing in low-income neighborhoods. Within blocks, schools were assigned to GGC ( $n = 221$  families) or a minimal contact control group ( $n = 208$ ). The sample completing both pre- and posttests was primarily composed of dual-parent families (85 percent) and Whites (98.6 percent). In 51 percent of the families, the target child for the intervention was female. (*Note: Research was done on this program under the program's former name, Preparing for the Drug Free Years.*)

## Target Areas

### Protective Factors To Increase

#### Individual

- Healthy beliefs and clear standards for behavior

#### Family

- Opportunities for children to be involved in and contribute to the family
- Skills for family communication and problem solving
- Recognition of new skills and family involvement
- Family bonding

### Risk Factors To Decrease

#### Individual

- Early initiation of substance abuse
- Favorable attitudes toward substance abuse

#### Family

- Poor family management
- Family conflict
- Parental involvement in problem behaviors and attitudes favorable to problem behaviors

#### Peer

- Friends who engage in problem behaviors

## PROGRAM DEVELOPERS

### **Richard Catalano, Ph.D.**

### **J. David Hawkins, Ph.D.**

Dr. Richard Catalano is a professor and the associate director of the Social Development Research Group, School of Social Work, University of Washington, Seattle. For more than 20 years, he has led research and program development to promote positive youth development and prevent problem behavior.

Dr. J. David Hawkins is the Kozmetsky Professor of Prevention at the School of Social Work and the director of the Social Development Research Group, both at the University of Washington, Seattle. His research focuses on understanding and preventing child and adolescent health and behavior problems.

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## RECOGNITION

Model Program—Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services

Programs That Work—National Institute on Drug Abuse, National Institutes of Health, U.S. Department of Health and Human Services

Promising Program—Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice

Promising Program—U.S. Department of Education